

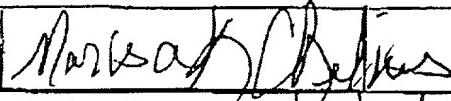
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DECLARATION

ADDITIONAL INVENTOR(S)

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor.

First	Shawn			Middle	I.M.	Family Name	Kooppler	Suffix
Inventor's Signature					Date			
Residence: City	Oregon		State	WI	Country	US	Citizenship	US
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Post Office Address								
City	Oregon	State	WI	Zip	53575	Country	US	Applicant
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor.			
First	Marissa			Middle		Family	Chelius	Suffix
Inventor's Signature					Date	11/30/01		
Residence: City	Greeley		State	CO	Country	US	Citizenship	US
Post Office Address	1601 Main Street							
Post Office Address								
City	Greeley	State	CO	Zip	24	Country	US	Applicant
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor.			
First				Middle		Family		Suffix
Inventor's Signature					Date			
Residence: City			State		Country		Citizenship	
Post Office Address								
Post Office Address								
City			State		Zip		Country	Applicant
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor.			
First				Middle		Family		Suffix
Inventor's Signature					Date			
Residence: City			State		Country		Citizenship	
Post Office Address								
Post Office Address								
City			State		Zip		Country	Applicant

Additional inventors and jointly named on supplemental sheet(s) attached hereto.

Please type a plus sign (+) inside this box 

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office		Attorney Docket Number	960296.97257
		First Named Inventor	Triplett	
<b>COMPLETE IF KNOWN</b>				
		Application Number		
		Filing Date	herewith	
		Group Art Unit		
		Examiner Name		

**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION**

Declaration Submitted  with Initial Filing      OR      Declaration Submitted after  Initial Filing

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**BACTERIAL INOCULANTS FOR ENHANCING PLANT GROWTH**

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YY) 

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YY) 

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional
60/251,137	12/04/00	

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.  
QBMAD1\311101

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## DECLARATION

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I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT international application in the manner provided in the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:

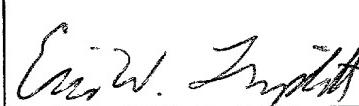
Firm Name \_\_\_\_\_  Customer Number or label \_\_\_\_\_  
OR  
 List attorney(s) and/or agent(s) name and registration number below

Name	Registration Number	Name	Registration Number
Herbert W. Mylius	24,578	Bennett J. Berson	37,094
Barry E. Sammons	25,608	Michael A. Jaskolski	37,551
Charles W. Jirauch	26,186	Richard T. Roche	38,599
Nicholas J. Seay	27,386	Terri S. Flynn	41,756
George E. Haas	27,642	John T. Pienkos	42,997
Michael J. McGovern	28,326	Daniel G. Radler	43,028
Carl R. Schwartz	29,437	Gregory M. Smith	43,136
Keith M. Baxter	31,233	Steven J. Wietrzny	44,402
John D. Franzini	31,356	Paul D. Amrozowicz	45,264
Janine R. Novatt	32,593	David M. Kettner	45,598
Jean C. Baker	35,433	Adam J. Forman	46,707
David G. Ryser	36,407	Zhibin Ren	47,897

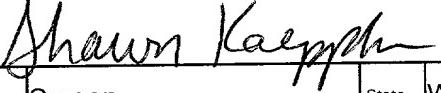
Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto  
Please direct all correspondence to  Customer Number or label \_\_\_\_\_ OR  Fill in correspondence address below

Name David M. Kettner  
Address Quarles & Brady LLP  
Address P O Box 2113  
City Madison State WI Zip 53701-2113  
Country US Telephone 608/251-5000 Fax 608/251-9166

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Name of Sole or First Inventor.			A petition has been filed for this unsigned inventor						
Given Name	Eric	Middle Initial	W	Family Name	Triplett			Suffix e.g. Jr.	
Inventor's Signature							Date	11/29/01	
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Post Office Address	4323 Rock Crest Road								
Post Office Address									
City	Middleton	State	WI	Zip	53562	Country	US	Applicant Authority	
<input type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto								

Please type a plus sign (+) inside this box

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name	Shawn		Middle Initial	M.	Family Name	Kaeppeler			Suffix e.g. Jr.	
Inventor's Signature						Date	11/29/01			
Residence: City	Oregon		State	WI	Country	US			Citizenship	US
Post Office Address	5290 County Highway A									
Post Office Address										
City	Oregon		State	WI	Zip	53575	Country	US		Applicant Authority
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name	Marisa		Middle Initial	K.	Family Name	Chelius			Suffix e.g. Jr.	
Inventor's Signature	Given Name						Date			
Residence: City	Greeley		State	CO	Country	US			Citizenship	US
Post Office Address	1601 Sixth Street									
Post Office Address										
City	Greeley		State	CO	Zip	80631	Country	US		Applicant Authority
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature						Date				
Residence: City			State		Country				Citizenship	
Post Office Address										
Post Office Address										
City			State		Zip		Country			Applicant Authority
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor					
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature						Date				
Residence: City			State		Country				Citizenship	
Post Office Address										
Post Office Address										
City			State		Zip		Country			Applicant Authority
<input type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto									